

Info Monthly: Fall 2011

Colleagues, friends, here's the [Fall 2011](#) "Info Monthly," organized in the same four sections as before, except for the addition as follows of E. Occasional Correspondence. It's *a little lengthy because it covers four months. Just scroll down each of the following sections for entries that matter to you* (each entry has a click-on to full text). Child and Adult Overweight/Obesity is as broad and deep an area as the epidemic is deep.

- A. Announcements: Meetings, Conferences, Resources, and So Forth;
- B. News: Print and Electronic media stories, usually bylined;
- C. Reports, Essays, Commentaries, Policy Briefs, now including the National Academy of Sciences pubs;
- D. Research and Reviews: peer-reviewed journal articles.

Thanks for all you do, Robert H. Ross, PhD, Research Associate Professor, Center for Community and Public Health, University of New England, Portland, Maine, Email: ross1@une.edu. December 18, 2011.

A. Announcements

1. See the Rudd Center Health Digest Archive at <http://www.yaleruddcenter.org/newsletter/> for Newsletters October 2008 – <http://www.yaleruddcenter.org/newsletter/archive.aspx>. Register to receive the Newsletter at <http://www.yaleruddcenter.org/newsletter/>
2. The Centers for Disease Control and Prevention presents Weight of the Nation™ 2012, its national conference on obesity prevention and control. The theme for the 2012 conference is Moving Forward, Reversing the Trend. Conference organizers will illustrate this theme through presentations—concurrent, plenary, poster or video—that emphasize how communities; early care and education facilities; medical care facilities; workplaces; states, territories, and tribes; and schools can change nutrition and physical activity environments to prevent and control obesity. The conference will convene elected and appointed public policy makers; federal, tribal, state, local, and territorial public health practitioners; media and social marketing experts; and partners and researchers vested in obesity prevention and control. Please check event website at www.weightofthenation.org regularly for agenda updates.
3. Join thousands of Mainers who've found a better way to work. Why drive alone to work when you can save half or more on your commute with GO MAINE? GO MAINE <http://www.gomaine.org/> is Maine's statewide commuter service providing access to low-cost, healthy, economical and eco-friendly options for commuting to and from work. From carpooling and vanpooling, to riding the bus, cycling, walking or teleworking, we help commuters revolutionize how they get to work. Join Maine's commuter revolution today! GET STARTED SAVING, RIGHT AWAY. GO MAINE has introduced a new online, interactive commuter ridematching system! Sign up and [create your commuter profile or log in to your existing profile today](#) and check out the changes. It's faster and easier than ever to find a carpool or carpool partner, find an empty vanpool seat, get transit and bike commuting information, or find a Park & Ride lot. It's also free. The [Portland Area Comprehensive Transportation System](#), the metropolitan planning organization for 15 communities in southern Maine, has released its 25-year long-range transportation plan: *Destination Tomorrow*. And this video talks about what shifting transportation trends may have in store for residents of the region.
4. **Ethical Issues In Interventions For Childhood Obesity. *Preventing Chronic Disease: Public Health Research, Practice and Policy*. Vol 8, Issue 5, Sep 2011.**
 - A91: [Ethical Concerns Regarding Interventions to Prevent and Control Childhood Obesity](#) John Govea
 - A92: [Protecting Children From Harmful Food Marketing: Options for Local Government to Make a Difference](#) Jennifer L. Harris, Samantha K. Graff
 - A93: [Childhood Obesity: A Framework for Policy Approaches and Ethical Considerations](#) Rogan Kersh, Donna F. Stroup, Wendell C. Taylor
 - A94: [Childhood Obesity: Issues of Weight Bias](#) Reginald L. Washington
 - A95: [Children With Special Health Care Needs: Acknowledging the Dilemma of Difference in Policy Responses to Obesity](#) Paula M. Minihan, Aviva Must, Betsy Anderson, Barbara Popper, Beth Dworetzky
 - A96: [Public Policy Versus Individual Rights in Childhood Obesity Interventions: Perspectives From the Arkansas Experience With Act 1220 of 2003](#) Martha M. Phillips, Kevin Ryan, James M. Raczynski
 - A97: [A Question of Competing Rights, Priorities, and Principles: A Postscript to the Robert Wood Johnson Foundation Symposium on the Ethics of Childhood Obesity Policy](#) Shiriki K. Kumanyika
 - A98: [The Ethical Basis for Promoting Nutritional Health in Public Schools in the United States](#) Patricia B. Crawford, Wendi Gosliner, Harvey Kayman

A99: [Ethical Family Interventions for Childhood Obesity](#) Mandy L. Perryman

A100: [Public Policy Versus Individual Rights and Responsibility: An Economist's Perspective](#) Frank J. Chaloupka

A101: [State Requirements and Recommendations for School-Based Screenings for Body Mass Index or Body Composition, 2010](#) Jennifer Linchey, Kristine A. Madsen

5. CDC-TV "Health Matters" focuses on the Obesity Epidemic. A new video from CDC's Division of Nutrition, Physical Activity and Obesity (DNPAO). Today, obesity is a national epidemic and a major contributor to the leading causes of death in the U.S. such as heart disease, stroke, diabetes and some cancers. Over 1 adult in 3 is obese, and 1 child in 6 is obese. [View the video.](#)
6. Most Americans aren't eating enough fruits and vegetables. Research shows that fruit and vegetables are important to promoting good health. Yet, the majority of Americans are not getting the recommended amount of fruits and vegetables they need each day. Fruits and vegetables contain essential vitamins, minerals, and fiber that may help protect you from chronic diseases, including stroke, other cardiovascular diseases, and certain cancers. However, it can be difficult for many Americans to eat the recommended amounts of fruits and vegetables because they might not be easily accessible, available, or affordable. This month, CDC encourages you to take steps to eat more fruits and vegetables each day. To help you get started, check out CDC's [30 Ways in 30 Days](#) for tips on eating more fruits and vegetables without breaking your budget.
7. Fruit and Vegetable Consumption Among High School Students. United States, 2010. [full text](#). MMWR, November 25, 2011 / 60(46);1583-1586. U.S. High School Students Are Not Eating Enough Fruits and Vegetables. November 23, 2011. Eating more fruits and vegetables helps reduce the risk of chronic diseases and can help maintain a healthy weight. However, a recent CDC report shows U.S. high school students continue to eat less than the recommended daily amount of both fruits and vegetables. Among high school students, girls who participate in less than 30 minutes of physical activity each day should eat at least 1.5 cups of fruit and 2.5 cups of vegetables each day. Boys who participate in less than 30 minutes of physical activity each day should eat at least 2 cups of fruit and 3 cups of vegetables each day. In 2010, about 1 in 4 U.S. high school students ate fruits less than once per day, and 1 in 3 U.S. high school students ate vegetables less than once per day. This low consumption of fruits and vegetables makes it unlikely that the majority of students are meeting the daily fruit and vegetable recommendations. Schools and communities can increase students' access to and availability of fruits and vegetables through: farm-to-school initiatives, school gardens and salad bars, and farmers markets. More Information [Morbidity and Mortality Weekly Report \(MMWR\)](#), [See the health benefits of eating fruit and vegetables](#), [Learn more about the Let's Move Salad Bars to Schools campaign](#), [Learn more about how schools can promote healthy eating](#), [Learn more about the National Farm-to-School initiative](#).
8. Children eat healthier foods when nutritious options are available. School children eat more fruits and vegetables when they have a variety of choices such as those provided in a salad bar. That's what research and actual experience in schools are discovering.¹ To accelerate this trend, the "Let's Move Salad Bars to Schools" program is offering incentives to help school lunch rooms become better equipped to provide tasty fruits and vegetables. The health benefits are many. Fruits and vegetables, as part of a healthy diet, are important for optimal child growth, weight management, and chronic disease prevention. Yet across the U.S., fewer than 1 in 10 children eat the daily recommended amount of fruits and vegetables.² School salad bars are one way to help reverse this deficit. When offered multiple fruit and vegetable choices, children respond by trying new items, incorporating greater variety into their diets, and increasing their daily consumption of fruits and vegetables. Any school, public or private, participating in the [National School Lunch Program](#) can apply for a start-up award to help pay for salad bar equipment. Interested schools can begin the process by completing an online application and creating their own individualized webpage at: www.saladbars2schools.org. The website offers details about the benefits of salad bars and resources to help increase fruit and vegetable consumption at schools. *Let's Move Salad Bars to Schools* is an initiative of the Food Family Farming Foundation, National Fruit and Vegetable Alliance, United Fresh Produce Association Foundation, and Whole Foods Market to support First Lady Michelle Obama's [Let's Move!](#) Initiative. More Information: [Let's Move Salad Bars to Schools](#), [Fruit & Vegetable Benefits](#), [State Indicator Report on Fruits and Vegetables, 2009](#), [Implementing Strong Nutrition Standards for Schools: Financial Implications](#), [Nutrition Standards for Foods in Schools, Making It Happen: School Nutrition Success Stories](#)
9. Million Hearts: Strategies to Reduce the Prevalence of Leading Cardiovascular Disease Risk Factors — United States, 2011. Cardiovascular disease (CVD) causes one in three (approximately 800,000) deaths reported each year in the United States. Annual direct and overall costs resulting from CVD are estimated at \$273 billion and \$444 billion, respectively. Strategies that address preventable CVD risk factors, such as hypertension, high cholesterol levels, and smoking, can greatly reduce the burden of CVD. To estimate the U.S. prevalence of these three risk factors, CDC analyzed data from the National Health and Nutrition Examination Survey, which indicated that 49.7% of U.S. adults aged ≥20 years (an estimated 107.3 million persons) have at least one of the three risk factors. [full text](#)

10. School Health Guidelines to Promote Healthy Eating and Physical Activity. Engaging children and adolescents in healthy eating and regular physical activity can lower their risk for obesity and related chronic diseases. Schools play a particularly critical role in the dietary and physical activity behaviors of children by establishing a safe and supportive environment with policies and practices that support healthy behaviors. Schools also provide opportunities for students to learn about and practice healthy eating and physical activity behaviors. This report describes school health guidelines for promoting healthy eating and physical activity, including coordination of school policies and practices; a supportive environment; school nutrition services; physical education and physical activity programs; health education; health, mental health, and social services; family and community involvement; school employee wellness; and professional development for school staff. [full text](#)
11. School Health Guidelines to Promote Healthy Eating and Physical Activity. Prepared by Division of Adolescent and School Health, National Center for Chronic Disease Prevention and Health Promotion 2011. Schools have a responsibility to help prevent obesity and promote physical activity and healthy eating through policies, practices, and supportive environments. This report describes school health guidelines for promoting healthy eating and physical activity, including coordination of school policies and practices; supportive environments; school nutrition services; physical education and physical activity programs; health education; health, mental health, and social services; family and community involvement; school employee wellness; and professional development for school staff members. These guidelines, developed in collaboration with specialists from universities and from national, federal, state, local, and voluntary agencies and organizations, are based on an in-depth review of research, theory, and best practices in healthy eating and physical activity promotion in school health, public health, and education. <http://www.cdc.gov/mmwr/PDF/rr/rr6005.pdf?source=govdelivery>, <http://www.cdc.gov/healthyyouth/npao/strategies.htm>, http://www.cdc.gov/healthyyouth/npao/pdf/PAN_Guidelines_Executive_Summary.pdf
12. Team Up During Childhood Obesity Awareness Month To Improve Physical Activity in Schools September 20, 2011
Did you know that being physically active is good for students' health and academic performance? Studies have shown that school-based physical activity can help improve academic performance, such as grades, test scores and better concentration and attention in the classroom. Youth ages 6 -17 need at least 60 minutes of physical activity every day. Most of the 60 minutes should be moderate or vigorous intensity, such as playing basketball, jumping rope, dancing, playing tag, walking, and running. Parents, teachers, school principals and other school staff can team up to improve physical activity in schools in a variety of ways:
- Join a school health council, if one exists. If none exist, begin by working with the superintendent or principal to create a health council at the school or district level.
 - Assess your school's physical activity policies and practices through the [School Health Index](#), an assessment and planning tool. Schools also can use this tool to improve physical activity policies and practices.
 - Increase the amount of time students spend in physical education or increase the quality of the physical education class. See [Strategies to Improve Quality Physical Education](#).
 - Provide recess every day for at least 20 minutes for elementary school students.
 - Incorporate physical activity breaks into the classroom.
 - Participate in *Walk to School Day* and support ongoing walk and bike to school programs.
 - Include more moderate to vigorous physical activity in afterschool programs.
- More Information. Many tools and resources exist to help improve physical activity in schools: [Worldwide Day of Play September 24](#), [School Health Guidelines to Promote Healthy Eating and Physical Activity](#), [CDC Physical Activity](#), [Youth Physical Activity](#), [The Association Between School-Based Physical Activity, Including Physical Education, and Academic Performance](#), [CDC Podcast on Adolescents and Physical Activity](#), [CDC Physical Activity Guidelines Toolkit](#), [CDC Childhood Obesity](#), [The Physical Education Curriculum Analysis Tool \(PECAT\)](#), [Let's Move!](#) [The National Physical Activity Plan](#), [CDC Overweight and Obesity Social Media Tools](#)
13. United Health Foundation's America's Health Rankings Finds Preventable Chronic Disease on the Rise; Obesity, Diabetes Undermining Country's Overall Health. <http://www.unitedhealthfoundation.org/News/NewsStory.aspx?id=eb62bf06-e1fd-4eb4-bc07-f3674912d87f>

B. News

1. State-by-state obesity rates. USA Today, Jul 7, 2011. Including "27. Maine (26.5%)." Source: Trust for America's Health; Robert Wood Johnson Foundation. Rankings are based on combining three years of data (2007-2009) from the Centers for Disease Control and Prevention's Behavioral Risk Factor Surveillance System. <http://yourlife.usatoday.com/fitness-food/diet-nutrition/story/2011/07/State-by-state-obesity-rates/49188748/1>

2. Andrew Seidman, Los Angeles Times, July 9, 2011. Food, advertising industries call voluntary guidelines unreasonable. FTC advertising guidelines encourage advertisers to promote healthy foods to kids, as well as limit fat and sugar in order to combat childhood obesity. Food, beverage and advertising industry reps say doing so could mean job loss for many. <http://www.latimes.com/health/sc-dc-0708-food-children-20110709,0,7207684.story>
3. **City vs. Country: Who is Healthier?** *The Wall Street Journal*, Melinda Beck, 07/12/2011. For many urban dwellers, the country conjures up images of clean air, fresh food and physical activities. But these days, Americans residing in major cities live longer, healthier lives overall than their country cousins—a reversal from decades past.
4. **Poll: Obesity Hits More Boomers Than Others in US.** *Associated Press*, Luran Neergaard, 07/19/2011. Cancer and memory loss are baby boomers' biggest health fears. Given their weight, maybe heart disease and diabetes should be.
5. Epidemic of Obesity in U.S. Kids Began in Late '90s. Ellin Holohan, HealthDay News, Jul 21, 2011. Reasons are unclear, but more media time, longer 'transition' to adulthood might be key, researcher says. The epidemic of excess weight gain and obesity among young Americans began about 15 years ago, a new study finds. "Our research documents the emergence of the obesity epidemic among adolescents in the later half of the 1990s, and among young adults in 2000," said Hedwig Lee, who led the study while at the University of North Carolina at Chapel Hill. She is now an assistant professor of sociology at the University of Washington in Seattle. <http://www.cfah.org/hbns/archives/viewSupportDoc.cfm?supportingDocID=1031>
6. Overweight Teens Neglected as Screenings Focus on Obesity. Nancy A. Melville, Medscape News, Jul 20, 2011. Primary care providers commonly neglect to offer appropriate weight management screening to the very adolescents who are at a high risk of becoming obese - those who are overweight - according to new research. <http://pediatrics.aappublications.org/content/early/2011/07/13/peds.2010-2559.abstract> published online July 18 in Pediatrics.
7. Stronger Social Safety Net Leads to Decrease in Stress, Childhood Obesity. ScienceDaily, July 21, 2011. Social safety net programs that reduce psychosocial stressors for low-income families also ultimately lead to a reduction in childhood obesity, according to research by a University of Illinois economist who studies the efficacy of food assistance programs on public health. <http://onlinelibrary.wiley.com/doi/10.1111/j.1467-789X.2010.00813.x/abstract>
8. P.J. Huffstutter, Los Angeles Times, July 20, 2011. In a bid to fight childhood obesity and change eating habits on the local level, First Lady Michelle Obama is expected to announce a healthful food financing initiative Wednesday that aims to draw grocery stores into so-called food desert areas in California. The \$200-million program, dubbed the California FreshWorks Fund, is a joint effort by the California Endowment and a team of grocery industry groups, healthcare organizations and leading Wall Street banks. <http://www.latimes.com/business/la-fi-grocery-loans-20110720,0,505868.story>. Supermarket Campaign: Improving Supermarket Access in Underserved Communities, The Food Trust: <http://www.thefoodtrust.org/php/programs/super.market.campaign.php>
9. **Health Advocates Push for Tax on Unhealthy Foods** *CBS News*, 07/26/2011. Some public health advocates are pushing cities and states to tax fattening, non-nutritious foods, like sugary soda, french fries, and donuts.
10. **Low 'Health Literacy' Hazardous to Your Health.** *HealthDay News*, Kathleen Doheny, 07/22/2011. In a review of 96 published studies, researchers concluded that low health literacy is linked with many types of poorer health outcomes and poorer use of health services.
11. Kids Get Extra Calories From Food Outside Home. Study Shows Children Are Getting 179 More Calories a Day Than They Were 30 Years Ago. Kathleen Doheny, WebMD Health News, Jul 25, 2011. U.S. children are eating more, and the extra calories often come from foods eaten while they are away from home, according to a new study. Overall, children eat about 179 more calories a day than children did three decades ago, says study researcher Jennifer M. Poti, a doctoral student at the University of North Carolina, Chapel Hill. <http://www.webmd.com/diet/news/20110725/kids-get-extra-calories-from-food-outside-home>
12. As unhealthy food outlets multiply, teens eat more junk. New study finds that living near fast food restaurants has a measurable effect on adolescent junk food consumption. News Release, UCLA Center for Health Policy Research, Jul 27, 2011. Got lots of fast food restaurants and other outlets that sell junk food in your neighborhood? Then your teen is more likely to nosh regularly on burgers and fries and wash them down with a soda. That is the unpalatable finding of a new study from the UCLA Center for Health Policy Research that examined the effect of higher concentrations of less healthy food outlets on adolescent junk food consumption. <http://www.healthpolicy.ucla.edu/pubs/files/foodenvpbjuly2011.pdf>
13. **Treating the Cause, Not the Illness [OPINION]** *The New York Times*, David Bornstein, 07/28/2011. Five decades after the war on poverty, a work force that can systematically address the social causes of illness is still to be built. Health Leads offers a model of how it might work.
14. **Calorie Labels Change Some Diners' Habits, Study Says** *FOX News*, Reuters, 07/27/2011. New York City's requirement that fast-food restaurants post calorie counts on menus led one in six customers to notice the information and buy foods with fewer calories, according to new research released on Tuesday.

15. School obesity-prevention program may reduce medical costs, study says. Kay Lazar, Boston Globe, Aug 1, 2011. Weaving nutrition and exercise lessons into middle-school classrooms can reduce eating disorders among girls and ultimately save medical costs, concludes a new study by Boston researchers published in the August issue of Archives of Pediatrics & Adolescent Medicine. <http://www.boston.com/Boston/whitecoatnotes/2011/08/school-obesity-prevention-program-may-reduce-medical-costs-study-says/92PO6CzWcxlOo6x2qcJAiO/index.html>
16. The high cost of healthy eating out of reach for many. People who spend the most on food tend to get the closest to meeting the federal guidelines for potassium, dietary fiber, vitamin D and calcium, the study found. Associated Press, Aug 4, 2011. SEATTLE – A healthy diet is expensive and could make it difficult for Americans to meet new U.S. nutritional guidelines, according to a study published Thursday that says the government should do more to help consumers eat healthier. People who spend the most on food tend to get the closest to meeting the federal guidelines for potassium, dietary fiber, vitamin D and calcium, the study found. <http://yourlife.usatoday.com/fitness-food/diet-nutrition/story/2011/08/The-high-cost-of-healthy-eating-out-of-reach-for-many/49805612/1>
17. [How to Make a Healthy Diet More Affordable](#). *TIME Healthland*, Meredith Melnick, 08/04/2011. Eating a healthier diet, such as the one recommended by the U.S. government, is no easy undertaking — not least because of its high cost. A new study published Thursday in the journal Health Affairs calculates that it would cost the average American an extra \$380 in fruits and vegetables per year to meet the government's recommendation for potassium intake alone.
18. Boston high school students drinking fewer sugary drinks. Deborah Kotz, Boston Globe, Aug 9, 2011. The seven-year-old policy restricting the sale of sugar-sweetened beverages in Boston Public Schools appears to be paying off: Consumption dropped among high school students from 1.7 servings a day on average in 2004 to 1.4 servings a day in 2006, according to a recent study published in the journal Preventing Chronic Disease. Harvard researchers calculated that this 3.8 ounce decline in sugary beverages added up to a drop in calorie consumption of about 45 calories per day. While the researchers didn't track changes in the students' body mass index, this type of calorie deficit could help with obesity prevention efforts, study leader Angie Cradock, a senior research scientist at the Harvard School of Public Health, said in an interview. <http://www.boston.com/Boston/dailydose/2011/08/boston-high-school-students-drinking-fewer-sugary-drinks/z6LV7repTt76hef1QOmI2l/index.html>
19. [Study: Boston Schools' Sugary Drinks Ban Paid Off](#) *The Boston Herald*, Associated Press, 08/09/2011. A new study indicates that the Boston public schools' ban on sugary drinks has paid off, with high school students drinking fewer even when they're not at school.
20. Is U.S. Farm Policy Feeding The Obesity Epidemic? Frank Morris, NPR, August 10, 2011. These days, U.S. farm policy is blamed for a lot of things - even the nation's obesity epidemic. The idea is that the roughly \$15 billion in annual subsidies that the federal government gives to farmers encourages them to grow too much grain. As a result, the theory goes, prices drop, food gets cheaper and we end up eating too much. Listen to the story (6 min) <http://www.npr.org/2011/08/10/139390696/is-u-s-farm-policy-feeding-the-obesity-epidemic>
21. [Study: A New Measure of Obesity Helps Predict Early Death](#). *TIME Healthland*, Alice Park, 08/15/2011. Being obese can endanger your health and even your life, but weight alone may not be enough to predict serious health problems in everyone. Now a new study published in the Canadian Medical Journal finds that it may be possible to tease out which obese people may be more likely to die as a result of their excess weight.
22. More evidence links pesticides, diabetes. Amy Norton, Reuters Health, Aug 17, 2011. People with relatively high levels of certain pesticides in their blood may have an increased risk of type 2 diabetes -- particularly if they are overweight, a new study suggests. The study, reported in the journal Diabetes Care, is not the first to link chemical pollutants to diabetes. <http://www.reuters.com/article/2011/08/17/us-more-evidence-links-pesticides-diabet-idUSTRE77G45120110817>
23. Cutting short lunch time in school may lead to obesity. Nanci Hellmich, USA Today, Aug 17, 2011. School districts across the country are revamping their menus to serve healthier fare, but most schools give students so little time to eat that they could be contributing unwittingly to the childhood obesity problem. Healthy food can take longer to eat, and research shows that wolfing down a meal in a hurry often means people eat more. A new national survey by the School Nutrition Association shows elementary kids have about 25 minutes for lunch; middle school and high school students about 30 minutes. That includes the time students need to go to the restroom, wash their hands, walk to the cafeteria and stand in line for their meals. <http://yourlife.usatoday.com/parenting-family/story/2011/08/Cutting-short-lunch-time-in-school-may-lead-to-obesity/50027612/1>
24. College students get low grade on eating fruits and vegetables. Jeannine Stein, Los Angeles Times / For the Booster Shots blog, August 17, 2011. College students may be going heavy on the books, but they could be light on fruits and vegetables, a study finds. Many may not be eating even one serving a day. The study was released online in the <http://www.jneb.org>/Journal of Nutrition Education and Behavior. <http://www.latimes.com/health/boostershots/la-heb-college-students-nutrition-2010817,0,6649161.story>

25. Call to measure duration of obesity. Michelle Roberts, BBC News, Aug 22, 2011. Doctors need to start counting "obese-years", say experts. Experts say the health hazards of obesity may have been grossly underestimated because we are not measuring the condition adequately. Risk calculations have focused on severity of weight gain alone and not how long it persists. Latest research suggests every additional decade of being obese more than doubles death risk. The researchers told the <http://ije.oxfordjournals.org/content/40/4/985.abstract> International Journal of Epidemiology a new measure is needed - the "obese-year". Similar to the "pack-year" used for smoking, it gives a further quantification that can be used to help estimate the associated health risks. <http://www.bbc.co.uk/news/health-14614209>
26. Thinking disorders, not lifestyle, may lead to obesity. Julia Medew, Sydney Morning Herald, August 24, 2011. There is growing evidence to suggest obesity should be treated partly as a brain condition. OBESE people are more likely to suffer from bad planning and decision-making skills, putting them in a vicious cycle of being unable to lose weight, a controversial study suggests. Researchers from the University of New South Wales said a review of 38 studies of obesity and cognitive function found a strong association between obesity and weakness in the executive part of the brain, which controls. <http://onlinelibrary.wiley.com/doi/10.1111/j.1467-789X.2011.00920.x/abstract>
<http://www.smh.com.au/lifestyle/diet-and-fitness/thinking-disorders-not-lifestyle-may-lead-to-obesity-20110823-1j8hr.html#ixzz1VywSZftP>
<http://www.smh.com.au/lifestyle/diet-and-fitness/thinking-disorders-not-lifestyle-may-lead-to-obesity-20110823-1j8hr.html>.
27. Study: Obesity Prevention Should Focus on Day Care. Lax Regulation Means Many Kids Don't Get Enough Healthy Foods or Exercise. Brenda Goodman, WebMD Health News, Aug 26, 2011. Experts say the fight against childhood obesity should have a new focus: day care. Studies show that about 82% of American children under age 6 are in child care outside the home while their parents work. That means many meals are no longer eaten around the family table, but at day care, where parents may have little control over what toddlers are eating. <http://www.webmd.com/parenting/news/20110826/study-obesity-prevention-should-focus-day-care>
28. Obesity Costing States Billion in Yearly Medical Expenses. Taxpayers funding up to 64% of these costs in some states, research shows. Mary Elizabeth Dallas, HealthDay News, Aug 24, 2011. Obesity is costing states up to \$15 billion each year, a new study suggests. In nine states, obesity already accounts for 10 percent or more of the state's annual medical expenses, according to researchers from RTI International, Duke University and the U.S. Agency for Healthcare Research and Quality. The study pointed out that taxpayers are footing a large part of the bill, with the state's share of obesity expenditures funded by Medicare and Medicaid ranging between 25 percent in Virginia and a whopping 64 percent in Rhode Island. <http://health.msn.com/healthy-living/obesity-costing-states-billion-in-yearly-medical-expenses>
<http://www.nature.com/oby/journal/vaop/ncurrent/full/oby2011169a.html>
29. Teen Boys Drink a Whole Lot of Sugar. John Gever, MedPage Today, September 1, 2011. Average daily sugar consumption among male teenagers in the form of sodas, energy drinks, and sweetened fruit juices was more than double the government's recommended limit for all added sugar in the diet, a large national survey found. Among boys and young men 12 to 19 years old participating in the National Health and Nutrition Examination Survey (NHANES) from 2005 to 2008, so-called sugar drinks accounted for a mean of 273 calories in their daily diet, according to data compiled Cynthia L. Ogden, PhD, and colleagues at the CDC's National Center for Health Statistics. Findings from the NHANES analysis appeared in <http://www.cdc.gov/nchs/data/databriefs/db71.pdf> NCHS Data Brief No. 71, released this week.
30. Healthy Living Can Cut Chances of Developing Diabetes. Steven Reinberg, HealthDay News, September 7, 2011. Study finds risk can be reduced up to 80 percent, researchers say. Living a healthy lifestyle can cut your risk of diabetes by as much as 80 percent, researchers from the U.S. National Institutes of Health report. http://www.nlm.nih.gov/medlineplus/news/fullstory_116139.html
<http://www.annals.org/content/155/5/292.abstract>
31. Attacking the Obesity Epidemic by First Figuring Out Its Cause. Jane E. Brody, New York Times, Sep 12, 2011. If you have gained a lot of unwanted pounds at any time during the last 30-odd years, you may be relieved to know that you are probably not to blame. At least not entirely. Many environmental forces, from economic interests of the food and beverage industries to the way our cities and towns are built, have conspired to subvert the body's natural ability to match <http://health.nytimes.com/health/guides/nutrition/diet-calories/overview.html?inline=nyt-classifier> calories in with calories out. And the solution to the nation's most pressing health problem - the ever-rising epidemic of overweight and <http://health.nytimes.com/health/guides/symptoms/morbid-obesity/overview.html?inline=nyt-classifier> obesity at all ages - lies in the answer to this question: Why did this happen in the first place? That is the conclusion of an impressive team of experts who spent the last two years examining obesity-promoting forces globally. They recently published their findings online in <http://www.thelancet.com/series/obesity> series of reports in The Lancet. But as has happened with

<http://health.nytimes.com/health/guides/specialtopic/smoking-and-smokeless-tobacco/overview.html?inline=nyt-classifier>smoking, it will take many years, a slew of different tactics and the political will to overcome powerful lobbying by culpable industries to turn the problem around and begin to bring the prevalence of overweight and obesity back to the levels of the 1970s. <http://www.nytimes.com/2011/09/13/health/13brody.html>

32. **Diabetes “Massive Challenge” as Cases Hit 366 Million** *Reuters*, Ben Hirschler, 09/13/2011. The number of people living with diabetes has soared to 366 million, and the disease kills one person every seven seconds, posing a "massive challenge" to healthcare systems worldwide, experts said on Tuesday.
33. Neighborhoods served by small grocers called "food deserts." Hannah Dreier, *Contra Costa Times*, Sep 20, 2011; updated Sep 21, 2011. When Alma Flores wants to make fajitas for dinner, she drives 15 minutes from her home near a FoodMaxx to La Loma Market because she finds fresher and less expensive produce there. http://www.insidebayarea.com/news/ci_18938176
34. **OBESITY: Mother, Baby Risk Factors Predict Child's Obesity**. Todd Neale, *MedPage Today*, October 3, 2011. ORLANDO -- Targeting four modifiable maternal and infant risk factors may make a large impact on reducing childhood obesity, researchers found. The four factors were maternal smoking during pregnancy, gestational weight gain, breastfeeding duration, and infant sleep duration, according to Matthew Gillman, MD, of Harvard Medical School in Boston. <http://www.medpagetoday.com/MeetingCoverage/OBESITY/28847>
35. **Report: Companies With ‘Better-for-You’ Foods Do Better Financially**. *The Wall Street Journal Health blog*, Katherine Hobson, 10/13/2011. Food and beverage companies with a greater percentage of sales from so-called “better-for-you” products do better, financially, than their peers with less healthful fare, a new report finds.
36. **Change Your Neighborhood, Improve Your Health**. *TIME Healthland*, Alice Park, 10/20/2011. Does where you live influence your health? Yes, and maybe even more dramatically than you might expect.
37. **Healthy People 2010 Misses Targets on Obesity and Health Disparities**. *American Medical News*, Christine S. Moyer, 10/24/2011. The nation's health improved during the past decade as adult cholesterol levels decreased and fewer people smoked cigarettes, according to the final review of Healthy People 2010. Such improvements led to an increase in life expectancy. But the country fell short of meeting Healthy People 2010 goals in some of the most critical areas, including reducing obesity and health disparities.

C. Reports, Essays, Commentaries, Policy briefs

1. **Adult Obesity Rates Increased in 16 States in the Past Year; Have Doubled or Nearly Doubled in 17 States Since 1995**. Adult obesity rates increased in 16 states over the last year and did not decrease in any, according to *Fas in Fat: How Obesity Threatens America's Future 2011*, a report from Trust for America's Health and the Robert Wood Johnson Foundation. For the first time, the report tracks adult obesity rates in each state over the last two decades. Twenty years ago, no state had a rate above 15 percent. Today, more than two out of three states, 38 total, have rates over 25 percent, and just one has a rate lower than 20 percent. Included in the report are recommendations for how policymakers and businesses can help to reverse the obesity epidemic by making it easier for children and families to be active and eat healthier foods.
 - * protecting the Public Health and Prevention Fund;
 - * implementing the Healthy, Hunger-Free Kids Act;
 - * implementing the National Physical Activity Plan; and
 - * restoring cuts to programs such as the Special Supplemental Nutrition Program for Women, Infants, and Children.RWJF and TFAH also recommend that the food and beverage industry adopt strong consistent standards for food marketing similar to <http://www.ftc.gov/opa/2011/04/foodmarket.shtm> those proposed by the Interagency Working Group.
2. **The Landscape of Adult Obesity: State Rates are Still High**, July 20, 2011. In 2010, no state reported adult obesity prevalence lower than 20 percent and 12 states reported an obesity prevalence of 30 percent or more. The obesity landscape over the past 10 years has changed dramatically. In 2000 no states reported obesity prevalence of more than 30 percent. The 2010 BRFSS data confirms that no state met the nation's *Healthy People 2010* goal to lower obesity prevalence to 15 percent within the past decade. “State obesity rates are still high,” said CDC Director Thomas Frieden, M.D., M.P.H. “If we lose sight of the seriousness of obesity as a public health issue, we run the risk of an increasingly unhealthy country.” But the changes won’t happen overnight. There’s no single or simple solution to the obesity epidemic. “It will take time to win in the fight against obesity,” said Dr. William Dietz, director of CDC’s Division of Nutrition, Physical Activity and Obesity. “We must continue to change the environments that increase food intake and make it hard for people to be active. By doing this, we’re investing in our children and grandchildren so they won’t have to carry this serious and costly burden.” CDC supports a number of initiatives that helps states, territories, tribes and communities combat both obesity through science-based nutrition, physical activity and obesity programs. Currently the focus is creating changes that support healthy eating and active living where Americans live, work, learn and play. Learn what you can do to help address the problem of

obesity. Visit <http://www.cdc.gov/obesity/data/trends.html> for helpful tips and to review rates in all states. More Information: [Overweight and Obesity Trends Among Adults](#), [Obesity Causes and Consequences](#), [Healthy Weight - it's not a diet, it's a lifestyle!](#), [The Obesity Epidemic – a CDC-TV video](#)

3. **QuickStats: Percentage of Adults Aged ≥18 Years Who Ever Received a Diagnosis of Diabetes, by Race/Ethnicity and Hispanic Subpopulation.** National Health Interview Survey. United States, 2009. [full text](#)
4. New Study Shows Increased Public Health Spending Can Save Lives [Investments in Prevention Linked with Decreased Mortality Rates](#). A new study released online this week by the journal *Health Affairs* strengthens the hypothesis that if local public health agencies spend more on keeping people healthy, they can save more lives lost to preventable illnesses. Glen P. Mays and Sharla A. Smith of the University of Arkansas for Medical Sciences in Little Rock analyzed changes in spending patterns and death rates within the service areas of the nation's nearly three thousand local public health agencies. Spanning a thirteen-year period, their analysis found that communities that benefited from larger increases in public health spending experienced larger reductions in infant mortality rates and deaths due to cardiovascular disease and diabetes—all common targets for public health interventions. [Read the study](#). [Learn more about the Foundation's investment in public health services and systems research](#). [Join the conversation about this topic and more at NewPublicHealth.org](#).
5. **QuickStats: Prevalence of Obesity Among Persons Aged 20–79 Years, by Sex.** Canada, 2007–2009, and United States, 2007–2008. [full text](#)
6. Report: 164 Million Obese Adults by 2030. Half of American Adults Will Be Obese if Trends Continue. Salyann Boyles, WebMD Health News, Aug 25, 2011. Half of U.S. adults will be obese by 2030 if current trends continue, a new report shows. About one in three adults in the U.S. are obese today. That figure will rise to half of American adults by 2030 if little is done to address the obesity epidemic, Columbia University researcher Claire Wang, PhD, said today at a news briefing in London. With those numbers will likely come higher rates of chronic diseases including diabetes, heart disease, arthritis, and some types of cancer. "Our projections find that rising obesity is going to result in increases in many of these chronic diseases which are disabling and expensive to treat," Wang said. "We have to act fast." The briefing highlighted a special obesity edition of the *The Lancet*, published online today. <http://www.webmd.com/diet/slideshow-weight-gain-shockers>. Obesity, *Lancet*, August 26, 2011
 - Series Comments

The future challenge of obesity. David King
<http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2811%2961261-0/fulltext>
<http://download.thelancet.com/pdfs/journals/lancet/PIIS0140673611612610.pdf>

Reversing the tide of obesity. William H Dietz
<http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2811%2961218-X/fulltext>
<http://download.thelancet.com/pdfs/journals/lancet/PIIS014067361161218X.pdf>

Where next for obesity. Harry Rutter
<http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2811%2961272-5/fulltext>
<http://download.thelancet.com/pdfs/journals/lancet/PIIS0140673611612725.pdf>
 - Series Papers

The global obesity pandemic: shaped by global drivers and local environments. Boyd A Swinburn, Gary Sacks, Kevin D Hall, Klim McPherson, Diane T Finegood, Marjory L Moodie, Steven L Gortmaker.
<http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2811%2960813-1/abstract>
<http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2811%2960813-1/fulltext>
<http://download.thelancet.com/pdfs/journals/lancet/PIIS0140673611608131.pdf>

Health and economic burden of the projected obesity trends in the USA and the UK. Y Claire Wang, Klim McPherson, Tim Marsh, Steven L Gortmaker, Martin Brown
<http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2811%2960814-3/abstract>
<http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2811%2960814-3/fulltext>
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Quantification of the effect of energy imbalance on bodyweight. Kevin D Hall, Gary Sacks, Dhruva Chandramohan, Carson C Chow, Y Claire Wang, Steven L Gortmaker, Boyd A Swinburn
<http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2811%2960812-X/abstract>
<http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2811%2960812-X/fulltext>
<http://download.thelancet.com/pdfs/journals/lancet/PIIS014067361160812X.pdf>

Changing the future of obesity: science, policy, and action. Steven L Gortmaker, Boyd A Swinburn, David Levy, Rob Carter, Patricia L Mabry, Diane T Finegood, Terry Huang, Tim Marsh, Marjory L Moodie
<http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2811%2960815-5/abstract>

<http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2811%2960815-5/fulltext>
<http://download.thelancet.com/pdfs/journals/lancet/PIIS0140673611608155.pdf>

7. Preventing Childhood Obesity: What Works, What Doesn't. Robert Wood Johnson Foundation, Aug 31, 2011. Four new RWJF-supported studies provide important insights about policies and practices that may influence dietary choices for children and families-at home, at school and in the community. The latest findings zero in on food marketing practices and industry self-regulation; New York City's menu-labeling requirement for chain restaurants; and a ban on sugar-sweetened beverages in Boston schools. Read the studies:
http://recp.rm02.net/ctt?m=4088003&r=Mjk5Njk3NjczMQS2&b=0&j=MjQ1NmZMjlxS0&k=Link29&kt=1&kd=http%3A%2F%2Fwww.rwjf.org%2Fchildhoodobesity%2Fproduct.jsp%3Ffid%3D72653%26cid%3DXEM_205591
U.S. Businesses Show Mixed Progress on Marketing a Healthy Diet to Children and Adolescents
http://recp.rm02.net/ctt?m=4088003&r=Mjk5Njk3NjczMQS2&b=0&j=MjQ1NmZMjlxS0&k=Link30&kt=1&kd=http%3A%2F%2Fwww.rwjf.org%2Fchildhoodobesity%2Fproduct.jsp%3Ffid%3D72665%26cid%3DXEM_205591
Self-Regulation by Food and Beverage Industry Does Little to Reduce Kids' Exposure to Unhealthy TV Ads
http://recp.rm02.net/ctt?m=4088003&r=Mjk5Njk3NjczMQS2&b=0&j=MjQ1NmZMjlxS0&k=Link31&kt=1&kd=http%3A%2F%2Fwww.rwjf.org%2Fchildhoodobesity%2Fproduct.jsp%3Ffid%3D72667%26cid%3DXEM_205591
Customers Who Use Menu-Labeling Information Order Fewer Calories
http://recp.rm02.net/ctt?m=4088003&r=Mjk5Njk3NjczMQS2&b=0&j=MjQ1NmZMjlxS0&k=Link32&kt=1&kd=http%3A%2F%2Fwww.rwjf.org%2Fchildhoodobesity%2Fproduct.jsp%3Ffid%3D72666%26cid%3DXEM_205591
Boston High School Students Drinking Fewer Sugary Beverages.
8. Report: U.S. spending billions of dollars to subsidize junk food. P.J. Huffstutter, Los Angeles Times, September 22, 2011. A new report released this week has found that, among the billions of dollars spent each year in federal subsidies for commodity crops, a steady flow of these taxpayer dollars are going to support high fructose corn syrup and three other common food additives used in junk food. The report, "Apples to Twinkies: Comparing Federal Subsidies of Fresh Produce and Junk Food" by <http://www.calpirg.org/> CALPIRG and the U.S. PIRG Education Fund, studies the interesting question of whether the nation's problem with obesity is fueled by farm subsidies. You can read an executive summary of the report, and <http://www.calpirg.org/home/reports/report-archives/health-care/health-care/apples-to-twinkies2g> and get a copy of the full report, here. http://latimesblogs.latimes.com/money_co/2011/09/taxpayers-funding-junk-food-farm-subsidies.html
9. Prevalence of Coronary Heart Disease, United States, 2006—2010. [full text](#). MMWR, October 14, 2011 / 60(40);1377-1381.
10. QuickStats: Percentage of Adults Aged ≥18 Years Who Engaged in Leisure-Time Strengthening Activities at Least Twice a Week, by Race/Ethnicity and Sex. National Health Interview Survey, United States, 2009. [full text](#). MMWR, October 21, 2011 / 60(41);1429.
11. [Sugary Drinks FACTS Report: Evaluating Sugary Drink Nutrition and Marketing to Youth](#). Rudd Center for Food Policy & Obesity. Quantifies the sugar, caffeine, and artificial sweeteners in sugary and energy drinks, as well as marketing practices targeted to children and youth, including through traditional media, product placement, and Internet advertising. Makes recommendations. Published: October 2011. Funder(s): Robert Wood Johnson Foundation, Rudd Foundation. Subject(s): Health; Children and Youth; Agriculture/Food

D. Research and Reviews

1. Child overweight/obesity

1.1. Determinants, Risk factors, Co-occurring conditions

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- 1.1.3. The Role of Parental Motivation in Family-Based Treatment for Childhood Obesity. Thrudur Gunnarsdottir, Urdur Njardvik, Anna S. Olafsdottir, Linda W. Craighead and Ragnar Bjarnason. *Obesity* 2011 19: 1654-1662; advance online publication, March 31, 2011; 10.1038/oby.2011.59 [Abstract](#) | [Full Text](#)
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- 1.1.8. Gillman M, et al "Early origins of childhood obesity: prediction, attributable risk, and potential public health impact" OBESITY 2011; Abstract 382-P. <http://www.medpagetoday.com/MeetingCoverage/OBESITY/28847>
- 1.2. Disparities**
- 1.2.1. Socioeconomic status and weight gain in early infancy. L P M M Wijlaars, L Johnson, C H M van Jaarsveld and J Wardle. Int J Obes 2011 35: 963-970; advance online publication, May 3, 2011; 10.1038/ijo.2011.88. [Abstract](#) | [Full Text](#)
- 1.2.2. Dutch versus English advantage in the epidemic of central and generalised obesity is not shared by ethnic minority groups: comparative secondary analysis of cross-sectional data. C Agyemang, A Kunst, R Bhopal, P Zaninotto, J Nazroo, M Nicolaou, N Unwin, I van Valkengoed, K Redekop and K Stronks. Int J Obes 2011 35: 1334-1346; advance online publication, February 15, 2011; 10.1038/ijo.2010.281. [Abstract](#) | [Full Text](#)
- 1.3. Prevalence, Incidence**
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1.6. Measurement

1. Adult overweight/obesity

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- 1.1.2. Long-term impact of overweight and obesity in childhood and adolescence on morbidity and premature mortality in adulthood: systematic review. J J Reilly and J Kelly. *Int J Obes* 2011 35: 891-898; advance online publication, October 26, 2010; 10.1038/ijo.2010.222. [Abstract](#) | [Full Text](#)
- 1.1.3. Ecological Momentary Assessment of Obesogenic Eating Behavior: Combining Person-Specific and Environmental Predictors. J. Graham Thomas, Sapna Doshi, Ross D. Crosby and Michael R. Lowe. *Obesity* 2011 19: 1574-1579; advance online publication, January 27, 2011; 10.1038/oby.2010.335 [Abstract](#) | [Full Text](#)
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- 1.1.9. Small portion sizes in worksite cafeterias: do they help consumers to reduce their food intake?. W M Vermeer, I H M Steenhuis, F H Leeuwis, M W Heymans and J C Seidell. *Int J Obes* 2011 35: 1200-1207; advance online publication, January 11, 2011; 10.1038/ijo.2010.271 [Abstract](#) | [Full Text](#)
- 1.1.10. Television Viewing and Obesity in 300 Women: Evaluation of the Pathways of Energy Intake and Physical Activity. Larry A. Tucker and Jared M. Tucker. *Obesity* 2011 19: 1950-1956; advance online publication, June 30, 2011; 10.1038/oby.2011.184 [Abstract](#) | [Full Text](#)
- 1.1.11. The Impact of Weight Stigma on Caloric Consumption. Natasha A. Schvey, Rebecca M. Puhl and Kelly D. Brownell. *Obesity* 2011 19: 1957-1962; advance online publication, July 14, 2011; 10.1038/oby.2011.204 [Abstract](#) | [Full Text](#)
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- 1.1.13. Four-Year Weight Losses in the Look AHEAD Study: Factors Associated With Long-Term Success. Thomas A. Wadden, Rebecca H. Neiberg, Rena R. Wing, Jeanne M. Clark, Linda M. Delahanty, James O. Hill, Jonathan Krakoff, Amy Otto, Donna H. Ryan and Mara Z. Vitolins ; The Look AHEAD Research Group. *Obesity* 2011 19: 1987-1998; advance online publication, July 21, 2011; 10.1038/oby.2011.230 [Abstract](#) | [Full Text](#)
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- 1.4. Physical activity and Nutrition**
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